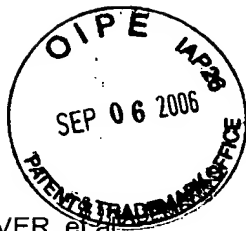


FORM PTO-1083
MAIL STOP:
COMMISSIONER FOR PATENTS
P.O. BOX 1450
Alexandria, VA 22313-1450



IFW

Docket No.: 567.1041US1
Date: September 1, 2006

1624

In re application of: Donald F. WEAVER, et al.
Serial No.: 09/932,677
Filed: August 16, 2001
For: **ANTI-EPILEPTOGENIC AGENTS ("DV1")**
Sir:

Transmitted herewith is a **REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS (1 page)** in the above-identified application.

- ☒ Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously submitted.
☐ A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.
☐ No fee for additional claims is required.
☐ A filing fee for additional claims calculated as shown below, is required:

	(Col. 1)	(Col. 2)	
FOR:	REMAINING	HIGHEST	
	AFTER	PREVIOUSLY	PRESENT
	AMENDMENT	PAID FOR	EXTRA
TOTAL CLAIMS	* Minus 24**	=	
INDEP. CLAIMS	* Minus 3***	=	
[] FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			

SMALL ENTITY			LARGE ENTITY	
RATE	FEE	OR	RATE	FEE
	x \$ 25			x \$ 50
	x \$ 100			x \$ 200
	+ \$ 180			+ \$ 360
TOTAL: \$			OR TOTAL: \$	

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☒ Also transmitted herewith are:
☐ Petition for two-month extension under 37 C.F.R. 1.136
☒ Other: **COVER LETTER (1 page)**
☒ Other: **STATEMENT UNDER 37 C.F.R. 3.73(b) (1 page)**
- ☐ [] Check(s) in the amounts of \$0.00 is/are attached to cover:
[] Information Disclosure Statement fee
[] Filing fee for additional claims under 37 C.F.R. 1.16
- ☒ The Assistant Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.
[] Any filing fee under 37 C.F.R. 1.16 for the presentation of additional claims which are not paid by check submitted herewith.
☒ Any patent application processing fees under 37 C.F.R. 1.17.
[] Any petition fees for extension under 37 C.F.R. 1.136 which are not paid by check submitted herewith, and it is hereby requested that this be a petition for an automatic extension of time under 37 CFR 1.136.

Robert J. Paradiso by Elizabeth Castellano
Robert J. Paradiso, 41,240
DAVIDSON, DAVIDSON & KAPPEL, LLC
485 Seventh Avenue, 14th Floor
New York, New York 10018
(212) 736-1940
Ky No. 52,121

I hereby certify that this correspondence and/or documents referred to as attached therein and/or fee are being deposited with the United States Postal Service as "first class mail" in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on September 1, 2006

DAVIDSON, DAVIDSON & KAPPEL, LLC

BY: *Elizabeth Castellano*
Elizabeth Castellano



567.1041US1

UNITED STATES PATENT AND TRADEMARK OFFICE

Re: Application of: Donald F. Weaver *et al.*
Serial No.: 09/932,677
Examiner: DEEPAK R. RAO
Art Unit: 1624
Filed: August 16, 2001
For: ANTI-EPILEPTOGENIC AGENTS ("DV1")

**REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY
AND CHANGE OF CORRESPONDENCE ADDRESS**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

September 1, 2006

Sir:

Submitted herewith is a Revocation of Power of Attorney With New Power of Attorney and Change of Correspondence Address. Also submitted herewith is a Statement Under C.F.R. 3.73(b).

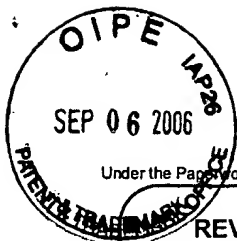
No fee is believed due with this submission. If it is determined that any fees are due, the Commissioner is hereby authorized to charge said fees to Deposit Account No. 50-0552.

Respectfully submitted,

DAVIDSON, DAVIDSON & KAPPEL, LLC

By: Robert J. Paradiso by Elizabeth L. Lutz
Robert J. Paradiso
Reg. No. 41,240
Reg No 52,121

Davidson, Davidson & Kappel, LLC
485 Seventh Avenue, 14th Floor
New York, N.Y. 10018
(212) 736-1940



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/82 (04-05)

Approved for use through 11/30/2005. OMB 0651-0035

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE
ADDRESS**

Application Number	09/932,677
Filing Date	August 16, 2001
First Named Inventor	Donald F. WEAVER
Art Unit	1624
Examiner Name	RAO, DEEPAK R
Attorney Docket Number	567.1041US1

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number :

23280

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

23280

OR

☒ Firm or
Individual Name

Davidson, Davidson & Kappel, LLC

Address

485 Seventh Avenue
14th Floor

City

New York

State NY

ZIP 10018

Country

USA

Telephone

212-736-1940

Email ddk@ddkpatent.com

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

R. Kerry Rowe

Name

R. Kerry Rowe, Vice Principal (Research)

Date

30/9/06.

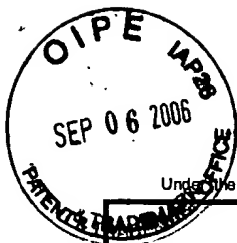
Telephone 613-533-2342

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PTO/SB/96 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Donald F. WEAVER, et al.Application No./Patent No.: 09/932,677Filed/Issue Date: August 16, 2001Entitled: Anti-Epileptogenic AgentsQueen's University at Kingstona University

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title, and interest

The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 9277, Frame 685/689, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____

To: _____

The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____

To: _____

The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____

To: _____

The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

R. Kerry Rowe
Signature

R. Kerry Rowe

Printed or Typed Name

Vice Principal (Research)

Title

30/9/06
Date

613-533-2342

Telephone Number

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.